

## CHAPTER 8

### SECTION 19.1

# TRANSTELEPHONIC MONITORING

Issue Date: October 12, 1984

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#### I. PROCEDURE CODE

**93012**

#### II. DESCRIPTION

A telephonic diagnostic monitoring procedure incorporates electronic transmission of data or remote detection and measurement of a medical condition, activity, or function (biotelemetry) between a patient and an authorized provider.

#### III. POLICY

Telephonic monitoring services are covered under the following circumstances:

- A. When the procedure which requires telephonic monitoring is cost-shared; or
- B. When the use of electronic transmission or biotelemetry is found to be care that is necessary to improve the management of a clinical condition in defined circumstances; or
- C. When transtelephonic monitoring of pacemakers is a complement to outpatient visits to a physician's office or specialized cardiac unit in a hospital or clinic; and
- D. When the device(s) used in the transmission of data or biotelemetry have been approved for marketing by the U.S. Food and Drug Administration.
- E. The following guidelines should be used to screen claims for transtelephonic monitoring of pacemakers prior to payment.

- 1. Mercury-zinc battery powered pacemaker:

- a. Both pacemaker and lead implanted:

- 1st month - once per week

- 2nd through 15th month - once every 4 weeks

16th through 18th month - every 2 weeks

19th month through to failure - once per week

- b. Only pacemaker implanted, lead not changed:

1st 2 weeks - once per week

3rd week through 15th month - once every 4 weeks

16th through 18th month - every 2 weeks

19th month through to failure - once per week

2. Lithium battery powered pacemakers:

- a. Both pacemaker and lead implanted:

1st month - once per week

2nd month through to failure - once every 4 weeks

- b. Only pacemaker implanted, lead not changed:

1st 2 weeks - once per week

3rd week through to failure - once every 4 weeks

F. These guidelines constitute the maximum frequency for which payment may be made without further development.

G. If further development is required written justification will be requested from the physician or monitoring service.

H. A medical judgment will be made on a case by case basis as to whether more frequent monitoring is medically necessary.

#### IV. POLICY CONSIDERATIONS

A. The charge from an otherwise authorized provider must represent the total charge for the monitoring service. This includes charges for use of the transmitting device, monitoring of the patient's pulse and interpretation and report by the cardiologist.

B. Services involving use of telephonic monitoring equipment by a physician or his/her staff will also be covered as a benefit.

V. EFFECTIVE DATE

**September 13, 1984 for pacemaker. All other uses, October 28, 1997.**

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